	JB DOGM	M/045/028	4/20/01	
SENDER: COMPLETE THIS SECTION			COMPLETE THIS SECTION ON DELIV	ERY
-	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		c. Signature	Agent Addressee
1.	Article Addressed to:		D. Is delivery address different from item 1?	
	JIM KELLEY CHEMICAL LIME CO 3700 HOLEN ST PO BOX 985004			
	FORT WORTH TX 76034	3. Service Type  A Certified Mail	ot for Merchandise	
			4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number (Copy from service label) 7000 0520 0021 7582 9040				
PS Form 3811, July 1999 Domestic Return Receipt				102595-99-M-1789

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UNITED STATES POSTAL SERVICE First-Class Mail Postage & Fees Paid USPS Permit No. G-10 Sender: Please print your name, address, and ZIP+4 in this box . DIVISION SALT LAKE CITY UT 84114-5801